

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00088044	2 Total pages filed: 93		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Lauren Ashley	MI	OFFICE USE ONLY		
	NICKNAME	LAST Simmons	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 56386 Houston, TX 77256			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Letty	MI			
	NICKNAME	LAST Ortega	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 200 Webster #208 Houston, TX 77002		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 746-2658					
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) State Representative District 146			12 OFFICE SOUGHT (if known) State Representative District 146		

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

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13 C / OH NAME	Simmons, Lauren Ashley (The Honorable)		14 Filer ID (Ethics Commission Filers) 00088044
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 66,819.01
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 73,437.80
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 18,479.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Lauren Ashley Simmons

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME	19 Filer ID	(Ethics Commission Filers)
Simmons, Lauren Ashley (The Honorable)	00088044	
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	66,319.01
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	500.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	73,190.80
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	247.00
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/60 Rpt: 4/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 512 Strategies LLC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aceti, Janet	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brookline, MA 02445	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acuna, Cristina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77031	
Principal occupation / Job title (See Instructions) General manager		Employer (See Instructions) Cactus music
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acuna, Cristina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77031	
Principal occupation / Job title (See Instructions) General manager		Employer (See Instructions) Cactus music
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acuna, Cristina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77031	
Principal occupation / Job title (See Instructions) General manager		Employer (See Instructions) Cactus music

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 2/60 Rpt: 5/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acuna, Cristina	7 Amount of Contribution (\$) \$10.00	
	6 Contributor address; City; State; Zip Code Houston, TX 77031		
8 Principal occupation / Job title (See Instructions) General manager		9 Employer (See Instructions) Cactus music	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acuna, Cristina	Amount of Contribution (\$) \$10.00	
	Contributor address; City; State; Zip Code Houston, TX 77031		
Principal occupation / Job title (See Instructions) General manager		Employer (See Instructions) Cactus music	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Sophie	Amount of Contribution (\$) \$38.00	
	Contributor address; City; State; Zip Code Houston, TX 77007		
Principal occupation / Job title (See Instructions) Data Consultant		Employer (See Instructions) GC AFLCIO	
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, LaTonya	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code Cypress, TX 77429		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stacey	Amount of Contribution (\$) \$57.00	
	Contributor address; City; State; Zip Code Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Arts Admin		Employer (See Instructions) Self employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/60 Rpt: 6/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Stacey	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Stacey Allen
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Willie	Amount of Contribution (\$) \$38.00
	Contributor address; City; State; Zip Code Houston, TX 77089	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alma A. Allen Campaign	Amount of Contribution (\$) \$380.00
	Contributor address; City; State; Zip Code Houston, TX 77047	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sunnyvale, CA 94087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sunnyvale, CA 94087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/60 Rpt: 7/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Evelyn 6 Contributor address; City; State; Zip Code Channelview, TX 77530	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barndt, Patricia Contributor address; City; State; Zip Code Harleysville, PA 19438	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Below, Shonda Contributor address; City; State; Zip Code Channelview, TX 77530	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) NE Houston AFT
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben E. Keith Company Texas PAC Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bess, Danielle Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Womack Development

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/60 Rpt: 8/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhatt, Bhuvanesh	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78240	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blueford-Daniels, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77251	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boswell, Erica	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77047	
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) N/a
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bourgeois, Jacques	Amount of Contribution (\$) \$38.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boutchee, Kathy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Manvel, TX 77578	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/60 Rpt: 9/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykins, Kathy	7 Amount of Contribution (\$) \$19.13
	6 Contributor address; City; State; Zip Code Ellicott City, MD 21043	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branch, Chadrick	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77026	
Principal occupation / Job title (See Instructions) Trucker		Employer (See Instructions) Knight transportation
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard Perry, Dana	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Windermere, FL 34786	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jermaca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fairfield, TX 75840	
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) Dallas County Democratic Party

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/60 Rpt: 10/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jermaca	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Fairfield, TX 75840	
8 Principal occupation / Job title (See Instructions) Organizing Director		9 Employer (See Instructions) Dallas County Democratic Party
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jermaca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fairfield, TX 75840	
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) Dallas County Democratic Party
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jermaca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fairfield, TX 75840	
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) Dallas County Democratic Party
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jermaca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fairfield, TX 75840	
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) Dallas County Democratic Party
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jermaca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fairfield, TX 75840	
Principal occupation / Job title (See Instructions) Organizing Director		Employer (See Instructions) Dallas County Democratic Party

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/60 Rpt: 11/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdette, Bryan	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Seattle, WA 98178	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Your Northwest Nest
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Helen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Madison, GA 30650	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Roberta	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Philadelphia, PA 19147	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Shelby	Amount of Contribution (\$) \$14.60
	Contributor address; City; State; Zip Code Houston, TX 77007	
Principal occupation / Job title (See Instructions) Finance Director		Employer (See Instructions) Strong Strategies
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Centerpoint Energy Inc. PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/60 Rpt: 12/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Dianca	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77047	
8 Principal occupation / Job title (See Instructions) Donor Relations		9 Employer (See Instructions) San Jac College
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chatman, Davida	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chipps, Mary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Ava, MO 65608	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chirlin, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Derwood, MD 20855	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choate, Evan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77098	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/60 Rpt: 13/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Molly	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77019	
8 Principal occupation / Job title (See Instructions) Senator		9 Employer (See Instructions) state of texas
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Jovanna	Amount of Contribution (\$) \$37.00
	Contributor address; City; State; Zip Code Houston, TX 77074	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis, Lisa	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Bear, DE 19701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Cheryl	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Rossharon, TX 77583	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E Bordelon, Kenneth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) Salesman		Employer (See Instructions) FullBloom

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/60 Rpt: 14/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Georgia	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78250	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Taryn	Amount of Contribution (\$) \$37.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emanuel, Henry	Amount of Contribution (\$) \$57.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Automation Specialist		Employer (See Instructions) State Farm
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emanuel, Henry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Automation Specialist		Employer (See Instructions) State Farm
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F Henderson, Lance	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Walmart Central Fill Pharmacy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/60 Rpt: 15/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felix, Suzanne	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77071	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foertsch, Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code St Petersburg, FL 33705	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Y	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Del Rio, TX 78840	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Mary Anne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Mary Anne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/60 Rpt: 16/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Mary Anne	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77096	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner Sr, Richard	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Chicago, IL 60620	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Michella	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shook Hardy Bacon
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace & McEwan Consulting LLC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Ronald	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ronald Green

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/60 Rpt: 17/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Don	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sebastopol, CA 95472	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Houston Museum of African American Culture
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guess, John	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Houston Museum of African American Culture
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HCA Texas Good Government Fund	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75240	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOME-PAC	Amount of Contribution (\$) \$380.00
	Contributor address; City; State; Zip Code Houston, TX 77064	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Karla	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Irving, TX 75063	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 15/60 Rpt: 18/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor Hammond, Dosier	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Princeton, NJ 08542		
8 Principal occupation / Job title (See Instructions) HR Immigration Specialist		9 Employer (See Instructions) Johns Hopkins University	
Date 08/04/2025	Full name of contributor Hammons, Katherine	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$37.00
	Contributor address; City; State; Zip Code Baltimore, MD 21211		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	
Date 07/15/2025	Full name of contributor Hand, Dorcas	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77008		
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) University of Houston-Downtown	
Date 10/09/2025	Full name of contributor Harris, Felicia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77030		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	
Date 08/05/2025	Full name of contributor Harwell, William	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$57.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/60 Rpt: 19/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haygood, Leah	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Silver Spring, MD 20902	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haymon, Ava Leavell	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebron, Duni	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Spring Branch
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henny, Bianca	Amount of Contribution (\$) \$37.00
	Contributor address; City; State; Zip Code Houston, TX 77029	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Siemens Energy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/60 Rpt: 20/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavinka, Bryan	7 Amount of Contribution (\$) \$380.00
	6 Contributor address; City; State; Zip Code Houston, TX 77019	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Siemens Energy
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavinka, Bryan	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Siemens Energy
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hlavinka, Bryan	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Siemens Energy
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollins, Allison	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollins, Allison	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/60 Rpt: 21/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollins, Allison	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77021	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollins, Allison	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honel, Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77025	
Principal occupation / Job title (See Instructions) Substitute teacher		Employer (See Instructions) FBISD
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honel, Michael	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77025	
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) FBISD
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honel, Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77025	
Principal occupation / Job title (See Instructions) Substitute teacher		Employer (See Instructions) FBISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/60 Rpt: 22/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornung, Clarence	7 Amount of Contribution (\$) \$3.00
	6 Contributor address; City; State; Zip Code Louisville, KY 40219	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Federation of Teachers COPE	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Firefighters Political Action Fund	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Houston, TX 77009	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Lawson	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77048	
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) Dr. Lawson Howard
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Tiffany	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77026	
Principal occupation / Job title (See Instructions) Change Lead Software & Platforms		Employer (See Instructions) Accenture

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/60 Rpt: 23/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Tiffany 6 Contributor address; City; State; Zip Code Houston, TX 77026	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Change Lead Software & Platforms		9 Employer (See Instructions) Accenture
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Wanda Contributor address; City; State; Zip Code Wilmington, NC 28401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Wanda Contributor address; City; State; Zip Code Wilmington, NC 28401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Wanda Contributor address; City; State; Zip Code Wilmington, NC 28401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Wanda Contributor address; City; State; Zip Code Wilmington, NC 28401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/60 Rpt: 24/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Wanda	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Wilmington, NC 28401	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huebel, Martha	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Donald	Amount of Contribution (\$) \$1.64
	Contributor address; City; State; Zip Code Shelton, WA 98584	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hygh, Larry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Pasadena, CA 91105	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyndman, Alicia	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Saint Albans, NY 11412	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/60 Rpt: 25/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/18/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00027342</u>) IBEW PAC Voluntary Fund	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Washington, DC 20001	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isis, Melanie	Amount of Contribution (\$) \$2.05
	Contributor address; City; State; Zip Code Silver Spring, MD 20910	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson-Thomas, Danielle	Amount of Contribution (\$) \$22.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76548	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Talarico Campaign	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Austin, TX 78761	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferson, Ashley	Amount of Contribution (\$) \$38.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77051	
Principal occupation / Job title (See Instructions) Internal Auditor		Employer (See Instructions) Orion Group Holdings

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/60 Rpt: 26/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Arelia	7 Amount of Contribution (\$) \$38.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77584	
8 Principal occupation / Job title (See Instructions) Chief		9 Employer (See Instructions) Harris County
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jacalyn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Eugene, OR 97404	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Ashley	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77051	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gabby	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Crestview, FL 32539	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Okaloosa County School District
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gabby	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Crestview, FL 32539	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Okaloosa County School District

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/60 Rpt: 27/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gabby	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Crestview, FL 32539	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Okaloosa County School District
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gabby	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Crestview, FL 32539	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Okaloosa County School District
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gabby	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Crestview, FL 32539	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Okaloosa County School District
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gabby	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Crestview, FL 32539	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Okaloosa County School District
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sharon	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77095	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/60 Rpt: 28/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Tina	7 Amount of Contribution (\$) \$57.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77489	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones-Darville, Carolyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadwell, Curtis	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Seattle, WA 98106	
Principal occupation / Job title (See Instructions) Gardener		Employer (See Instructions) University of Washington
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadwell, Curtis	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Seattle, WA 98106	
Principal occupation / Job title (See Instructions) Gardener		Employer (See Instructions) University of Washington
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadwell, Curtis	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Seattle, WA 98106	
Principal occupation / Job title (See Instructions) Gardener		Employer (See Instructions) University of Washington

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/60 Rpt: 29/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadwell, Curtis	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Seattle, WA 98106	
8 Principal occupation / Job title (See Instructions) Gardener		9 Employer (See Instructions) University of Washington
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadwell, Curtis	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Seattle, WA 98106	
Principal occupation / Job title (See Instructions) Gardener		Employer (See Instructions) University of Washington
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Brooke	Amount of Contribution (\$) \$146.00
	Contributor address; City; State; Zip Code Los Angeles, CA 90038	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) KPMG
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Yolanda	Amount of Contribution (\$) \$146.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Bill	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77007	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) GAP Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/60 Rpt: 30/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, William	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77002	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Gwen	Amount of Contribution (\$) \$57.00
	Contributor address; City; State; Zip Code Lorton, VA 22079	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, REVLYNN	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78723	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lark, Alice	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawler, Martha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code La Pine, OR 97739	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/60 Rpt: 31/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Robyn	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code West Palm Beach, FL 33401	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laycock, David	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Chester, NJ 07930	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, Mercedes	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77006-2712	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Danyae	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Washington, DC 20009	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Myron	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Houston, TX 77057	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) The Maverick Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 29/60 Rpt: 32/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/18/2025	5 Full name of contributor Lester, Myron 6 Contributor address; City; State; Zip Code Houston, TX 77057	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Managing Partner		9 Employer (See Instructions) The Maverick Group	
Date 07/29/2025	Full name of contributor Ligon, Katharine Houston, TX 77008	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self	
Date 11/10/2025	Full name of contributor Linbarger Goggan Blair & Sampson LLP Austin, TX 78760	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/05/2025	Full name of contributor Linden, Greg Oakland, CA 94602	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) UC Berkeley	
Date 09/18/2025	Full name of contributor Loewy, Adam Austin, TX 78701	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Law		Employer (See Instructions) Loewy Law Firm	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/60 Rpt: 33/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madison, Thasia	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Spring, TX 77373	
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) JPMorgan Chase
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madry, Lisa	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77011	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Rare Bird Advisors
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallet-Fontenot, Coretta	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77047	
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) TXAFT
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsh, Karen	Amount of Contribution (\$) \$1.43
	Contributor address; City; State; Zip Code St Petersburg, FL 33709	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Allison	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77018	
Principal occupation / Job title (See Instructions) Claims Adjuster		Employer (See Instructions) Progressive Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/60 Rpt: 34/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Matt	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Austin, TX 78705	
8 Principal occupation / Job title (See Instructions) Founder		9 Employer (See Instructions) Modern Minds Communications
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Matt	Amount of Contribution (\$) \$180.00
	Contributor address; City; State; Zip Code Austin, TX 78705	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Modern Minds Communications
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masterson, James	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Aurora, CO 80016	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurer, Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Moorhead, MN 56560	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Coleton	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Baytown, TX 77521	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/60 Rpt: 35/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/29/2025	5 Full name of contributor McAllen, Lincoln 6 Contributor address; City; State; Zip Code Wayne, PA 19807-3617	7 Amount of Contribution (\$) \$4.00
	8 Principal occupation / Job title (See Instructions) Not Employed	9 Employer (See Instructions) Not Employed
Date 07/29/2025	Full name of contributor McAllen, Lincoln Contributor address; City; State; Zip Code Wayne, PA 19808	Amount of Contribution (\$) \$4.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 09/29/2025	Full name of contributor McAllen, Lincoln Contributor address; City; State; Zip Code Wayne, PA 19807-3617	Amount of Contribution (\$) \$4.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/17/2025	Full name of contributor McCarthy, Chris Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$380.00
	Principal occupation / Job title (See Instructions) Chief of Staff	Employer (See Instructions) US HOR
Date 07/23/2025	Full name of contributor McClellan, Elias Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Accountant	Employer (See Instructions) University of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/60 Rpt: 36/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Akela	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Desoto, TX 75115	
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 34/60 Rpt: 37/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$1.00	
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self	
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self	
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self	
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNiel, Kathryn Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$200.00	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Jose Contributor address; City; State; Zip Code Pasadena, TX 77503	Amount of Contribution (\$) \$250.00	
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Medrano Insurance Agency	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/60 Rpt: 38/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melsheimer, Susan	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Baton Rouge, LA 70817	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaud, John-Paul	Amount of Contribution (\$) \$1.67
	Contributor address; City; State; Zip Code Hays, KS 67601	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Toomey & Associates	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Shanley	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code San Diego, CA 92116	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Los Angeles, CA 90027	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/60 Rpt: 39/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milligan, Maureen	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Austin, TX 78731	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Teaching hospitals of Texas
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moilanen, Erin	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Santa Rosa, CA 95404	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) AZA
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Daryl	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77010-2021	
Principal occupation / Job title (See Instructions) Hospital Administration		Employer (See Instructions) MD Anderson
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Tiffany	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77025	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) KIPP Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/60 Rpt: 40/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daphne	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daphne	Amount of Contribution (\$) \$380.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Debbie	Amount of Contribution (\$) \$1.66
	Contributor address; City; State; Zip Code Charlotte, NC 28277	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NRG Energy Inc. PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nance, Carletta	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Home, TX 77090	
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/60 Rpt: 41/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Audrey	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77019	
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Medical Consultant
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Therese	Amount of Contribution (\$) \$8.19
	Contributor address; City; State; Zip Code Chicago, IL 60615	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Kirstin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Washington, DC 20016	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Kirstin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Washington, DC 20016	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Kirstin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Washington, DC 20016	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/60 Rpt: 42/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Kirstin	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Washington, DC 20016	
8 Principal occupation / Job title (See Instructions) Self employed		9 Employer (See Instructions) Self employed
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Kirstin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Washington, DC 20016	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Kirstin	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Washington, DC 20016	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Self employed
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oathout, Patrick	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Washington, DC 20005	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ojeda, Jeanette	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code houston, TX 77075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/60 Rpt: 43/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orion, Demethra	7 Amount of Contribution (\$) \$467.00
	6 Contributor address; City; State; Zip Code Houston, TX 77070	
8 Principal occupation / Job title (See Instructions) Disaster Recovery Specialist		9 Employer (See Instructions) Small Business Administration
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panzarella, Joseph	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) Orsted
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parish, Amanda	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Margaret	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Fox Point, WI 53217	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00016683) Pfizer PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code New York, NY 10001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/60 Rpt: 44/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, LaToya	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Rosenberg, TX 77471	
8 Principal occupation / Job title (See Instructions) Human Resources		9 Employer (See Instructions) TCCC
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierre, Jenee	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) TCCC
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Precht, Anna	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prunty, Aprel	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Rockford, IL 61109	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purser, Thomas Ray	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/60 Rpt: 45/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Queen-Tabor, Tracy	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Cleveland Heights, OH 44118	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Tarsha	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77088	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Alan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Cahokia Heights, IL 62203	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ladd	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/60 Rpt: 46/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, April Leah M	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	
8 Principal occupation / Job title (See Instructions) Director NP		9 Employer (See Instructions) The Welcome Table
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, April Leah M	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Director NP		Employer (See Instructions) The Welcome Table
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, April Leah M	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Director NP		Employer (See Instructions) The Welcome Table
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, April Leah M	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Director NP		Employer (See Instructions) The Welcome Table
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, April Leah M	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Principal occupation / Job title (See Instructions) Director NP		Employer (See Instructions) The Welcome Table

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/60 Rpt: 47/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Carol	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Manchester, NH 03104	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Carroll	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Southern University
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Juanita	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Houston, TX 77091	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Juanita	Amount of Contribution (\$) \$38.00
	Contributor address; City; State; Zip Code Houston, TX 77091	
Principal occupation / Job title (See Instructions) Owner/Consultant		Employer (See Instructions) A. Robinson & Associates
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, MaryAnn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Wyncote, PA 19095	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/60 Rpt: 48/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodine, Richard	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Barry	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Stormville, NY 12582	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Marci	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401	
Principal occupation / Job title (See Instructions) Attorney/volunteer		Employer (See Instructions) Self
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Marci	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401	
Principal occupation / Job title (See Instructions) Attorney/volunteer		Employer (See Instructions) Self
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Marci	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401	
Principal occupation / Job title (See Instructions) Attorney/volunteer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/60 Rpt: 49/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Wintress D	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Lakeville, CT 06039	
8 Principal occupation / Job title (See Instructions) Higher Ed Professional		9 Employer (See Instructions) University of South Carolina
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothstein, susan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Brookline, MA 02445	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Susman Godfrey
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Alejandra	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77006	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Susman Godfrey
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Alejandra	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77006	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Susman Godfrey
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Alejandra	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77006	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Susman Godfrey

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/60 Rpt: 50/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Jayla	7 Amount of Contribution (\$) \$22.00
	6 Contributor address; City; State; Zip Code Katy, TX 77449	
8 Principal occupation / Job title (See Instructions) Organizer		9 Employer (See Instructions) Scale to Win
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Kenneth	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Arlington, TX 76002	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Tarrant County
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneeberger, Claire	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Santa Cruz, CA 95061	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selig, Carol	Amount of Contribution (\$) \$57.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Tom	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code San Jose, CA 95126	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/60 Rpt: 51/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepard, Eulundia	7 Amount of Contribution (\$) \$101.00
	6 Contributor address; City; State; Zip Code Houston, TX 77019	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Naomi	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Pittsburgh, PA 15238	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-Employed
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Liz	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77093	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-Employed
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Liz	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77093	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-Employed
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Liz	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77093	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/60 Rpt: 52/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Liz	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Houston, TX 77093	
8 Principal occupation / Job title (See Instructions) Photographer		9 Employer (See Instructions) Self-Employed
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Liz	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77093	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self-Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRelle, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRelle, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRelle, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/60 Rpt: 53/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRelle, Paul	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77035	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRelle, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SoRelle, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77035	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St. Germain, Raymond	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77007	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Angela	Amount of Contribution (\$) \$380.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77019	
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) HCC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/60 Rpt: 54/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockard, Natalie	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code St Petersburg, FL 33701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TSA PAC	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/60 Rpt: 55/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Beer Alliance of Texas PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Aricia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77091	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Tiffany	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77411	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Higher Educator
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/60 Rpt: 56/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troutman Pepper Locke LLP	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Atlanta, GA 30308	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Ebony	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Ebony	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TxANA PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78757	
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upadhyay, Neha	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code San Francisco, CA 94103	
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 54/60 Rpt: 57/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallot, Colette	7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code Dallas, TX 75219		
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self	
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Steptoe LLP	
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Steptoe LLP	
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Steptoe LLP	
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Steptoe LLP	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/60 Rpt: 58/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 12/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) Lawyer	9 Employer (See Instructions) Steptoe LLP
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Lawyer	Employer (See Instructions) Steptoe LLP
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vital, Carlos Contributor address; City; State; Zip Code Friendswood, TX 77546-4179	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions) Physician	Employer (See Instructions) Self
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, William Contributor address; City; State; Zip Code Dublin, OH 43017	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watters, Jeff Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Gray Reed & McGraw LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/60 Rpt: 59/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werstein, Lori	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Laguna Beach, CA 92651	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas BW-PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilensky, Sharon	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code San Francisco, CA 94122	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Nantasha	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Cambria Heights, NY 11411	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Delores	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 57/60 Rpt: 60/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)			3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Gerald	7 Amount of Contribution (\$) \$500.00	
	6 Contributor address; City; State; Zip Code Houston, TX 77004		
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self	
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Susanne	Amount of Contribution (\$) \$1.64	
	Contributor address; City; State; Zip Code Lafayette, CA 94549		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) HISD	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Debra S	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Houston, TX 77025		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas	
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Melissa	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code Houston, TX 77023		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas	
Date 08/13/2025			

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/60 Rpt: 61/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Melissa	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Houston, TX 77023	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Learning Institute of Texas
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/60 Rpt: 62/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/27/2025	5 Full name of contributor Yarborough, Melissa	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Houston, TX 77023	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Learning Institute of Texas
Date 12/13/2025	Full name of contributor Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas
Date 12/27/2025	Full name of contributor Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas
Date 08/13/2025	Full name of contributor Yarborough, Melissa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77023	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Learning Institute of Texas
Date 10/17/2025	Full name of contributor Ziegler, Fernando	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) Principal Geophysicist I		Employer (See Instructions) BHP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/60 Rpt: 63/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) delBosque, Gabrielle	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77055	
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions) Houston Methodist
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kerr, mary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Minneapolis, MN 55403	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) reed, nell	Amount of Contribution (\$) \$69.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sanders, nancy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 64/93
2 FILER NAME Simmons, Lauren Ashley (The Honorable)		3 Filer ID (Ethics Commission Filers) 00088044
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 10/18/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Rodney Ellis Campaign Committee 7 Contributor address; City; State; Zip Code Houston, TX 77256	8 Amount of contribution (\$) 9 In-kind contribution description \$500.00 event food and refreshments <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/28 Rpt: 65/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/31/2025	5 Payee name Actblue	
6 Amount (\$) \$183.50	7 Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/30/2025	Payee name Actblue	
Amount (\$) \$195.56	Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Actblue	
Amount (\$) \$261.51	Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/28 Rpt: 66/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/30/2025	5 Payee name Actblue	
6 Amount (\$) \$603.10	7 Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/30/2025	Payee name Actblue	
Amount (\$) \$49.04	Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/30/2025	Payee name Actblue	
Amount (\$) \$15.34	Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/28 Rpt: 67/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 12/09/2025	5 Payee name Bayou City Strategies	
6 Amount (\$) \$1,508.00	7 Payee address; City; PO Box 667204 Houston, TX 77266	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 08/29/2025	Payee name Campaign Verify	
Amount (\$) \$95.00	Payee address; City; 1215 31st St. NW Washington, DC 20007	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10DLC renewal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held
Date 07/01/2025	Payee name Charter Furniture Rental	
Amount (\$) \$94.23	Payee address; City; 4181 Centurion Way Addison, TX 75001	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense furniture rental for Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/28 Rpt: 68/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/08/2025	5 Payee name City of Austin	
6 Amount (\$) \$71.72	7 Payee address; City; State; Zip Code PO Box 1088 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense utilities for Austin Apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name City of Austin	
Amount (\$) \$28.59	Payee address; City; State; Zip Code PO Box 1088 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense utilities for Austin Apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name Constant Contact	
Amount (\$) \$119.00	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense website hosting, Austin apartment rental furniture, email services, video call services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/28 Rpt: 69/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/09/2025	5 Payee name Constant Contact	
6 Amount (\$) \$119.00	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name Constant Contact	
Amount (\$) \$119.00	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name Constant Contact	
Amount (\$) \$119.00	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/28 Rpt: 70/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/10/2025	5 Payee name Constant Contact	
6 Amount (\$) \$119.00	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name GoDaddy	
Amount (\$) \$104.72	Payee address; City; State; Zip Code 100 S. Mill Ave. Ste. 1600 Tempe, AZ 85281	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense domain renewals
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Google Fiber	
Amount (\$) \$158.77	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense utilities for Austin Apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/28 Rpt: 71/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/07/2025	5 Payee name Google Fiber	
6 Amount (\$) \$72.16	7 Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense utilities for Austin Apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/30/2025	Payee name Google	
Amount (\$) \$89.54	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gsuite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Google	
Amount (\$) \$25.63	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense google voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/28 Rpt: 72/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/01/2025	5 Payee name Google	
6 Amount (\$) \$76.75	7 Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gsuite
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Google	
Amount (\$) \$25.47	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense google voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Google	
Amount (\$) \$86.24	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gsuite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/28 Rpt: 73/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 08/01/2025	5 Payee name Google	
6 Amount (\$) \$25.47	7 Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense google voice
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/31/2025	Payee name Google	
Amount (\$) \$89.54	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gsuite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/01/2025	Payee name Google	
Amount (\$) \$25.53	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense google voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/28 Rpt: 74/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/30/2025	5 Payee name Google	
6 Amount (\$) \$89.54	7 Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gsuite
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/01/2025	Payee name Google	
Amount (\$) \$25.49	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense google voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Google	
Amount (\$) \$89.54	Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gsuite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/28 Rpt: 75/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/01/2025	5 Payee name Google	
6 Amount (\$) \$25.63	7 Payee address; City; State; Zip Code 1600 Amphitheater Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense google voice
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name Grant Martin Campaigns	
Amount (\$) \$24,708.88	Payee address; City; State; Zip Code 2383 Bush St. San Francisco, CA 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial payment of previous reported invoice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/25/2025	Payee name Grant Martin Campaigns	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 2383 Bush St. San Francisco, CA 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial payment of previous reported invoice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/28 Rpt: 76/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044	
4 Date 07/29/2025	5 Payee name Grant Martin Campaigns		
6 Amount (\$) \$8,568.21	7 Payee address; City; 2383 Bush St. San Francisco, CA 94115	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial payment of previous reported invoice	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Date 07/29/2025	Office sought Payee name Grant Martin Campaigns	Office held
Amount (\$) \$4,342.40	Payee address; City; 2383 Bush St. San Francisco, CA 94115	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Partial payment of previous reported invoice	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Date 12/30/2025	Office sought Payee name Grant Martin Campaigns	Office held
Amount (\$) \$645.70	Payee address; City; 2383 Bush St. San Francisco, CA 94115	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website, contract labor and email services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/28 Rpt: 77/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/18/2025	5 Payee name Gusto	
6 Amount (\$) \$2,000.00	7 Payee address; City; 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/28/2025	Payee name Gusto	
Amount (\$) \$2,000.00	Payee address; City; 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Gusto	
Amount (\$) \$2,000.00	Payee address; City; 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/28 Rpt: 78/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/01/2025	5 Payee name Gusto	
6 Amount (\$) \$2,000.00	7 Payee address; City; 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/12/2025	Payee name Gusto	
Amount (\$) \$1,250.00	Payee address; City; 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name Gusto	
Amount (\$) \$1,250.00	Payee address; City; 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/28 Rpt: 79/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/18/2025	5 Payee name Gusto	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/03/2025	Payee name Gusto	
Amount (\$) \$65.03	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name Gusto	
Amount (\$) \$58.63	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/28 Rpt: 80/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/04/2025	5 Payee name Gusto	
6 Amount (\$) \$58.63	7 Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name Gusto	
Amount (\$) \$58.63	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Gusto	
Amount (\$) \$52.23	Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/28 Rpt: 81/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/07/2025	5 Payee name Gusto	
6 Amount (\$) \$52.23	7 Payee address; City; State; Zip Code 525 20th St. San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Harris County Democratic Party	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 3302 Canal St. Houston, TX 77003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense filing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Harris, Andre Marcel	
Amount (\$) \$720.95	Payee address; City; State; Zip Code 3113 Saint Charles St. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursements
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/28 Rpt: 82/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044	
4 Date 08/25/2025	5 Payee name Holiday Inn Express		
6 Amount (\$) \$99.00	7 Payee address; City; 805 Neches St. Austin, TX 78701	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lodging while In Austin	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Date 07/31/2025	Office sought Payee name Legislative Solutions	Office held
Amount (\$) \$325.00	Payee address; City; PO Box 5643 Austin, TX 78763	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email distribution service	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Date 12/02/2025	Office sought Payee name NGP VAN	Office held
Amount (\$) \$157.50	Payee address; City; 1101 15th St. NW Ste. 500 Washington, DC 20005	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance software	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/28 Rpt: 83/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/24/2025	5 Payee name NGP VAN	
6 Amount (\$) \$157.50	7 Payee address; City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NGP VAN	Office sought Office held
Date 11/03/2025	Payee name NGP VAN	
Amount (\$) \$157.50	Payee address; City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NGP VAN	Office sought Office held
Date 09/04/2025	Payee name NGP VAN	
Amount (\$) \$157.50	Payee address; City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NGP VAN	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/28 Rpt: 84/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 09/02/2025	5 Payee name NGP VAN	
6 Amount (\$) \$157.50	7 Payee address; City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name NGP VAN	
Amount (\$) \$157.50	Payee address; City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Primo Brands Waterserv	
Amount (\$) \$93.23	Payee address; City; State; Zip Code 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/28 Rpt: 85/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/28/2025	5 Payee name Primo Brands Waterserv	
6 Amount (\$) \$62.35	7 Payee address; City; 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name Primo Brands Waterserv	
Amount (\$) \$57.22	Payee address; City; 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Primo Brands Waterserv	
Amount (\$) \$57.22	Payee address; City; 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/28 Rpt: 86/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/18/2025	5 Payee name Primo Brands Waterserv	
6 Amount (\$) \$57.22	7 Payee address; City; 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name Primo Brands Waterserv	
Amount (\$) \$51.82	Payee address; City; 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/21/2025	Payee name Primo Brands Waterserv	
Amount (\$) \$5.40	Payee address; City; 1150 Assembly Dr. Ste. 800 Tampa, FL 33607	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water service for district office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/28 Rpt: 87/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/25/2025	5 Payee name Sonesta Simply Suites	
6 Amount (\$) \$105.02	7 Payee address; City; 4320 S. I-35 Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lodging while In Austin
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name Strong Strategies LLC	
Amount (\$) \$1,644.81	Payee address; City; 325 W. 18th St. Houston, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name Strong Strategies LLC	
Amount (\$) \$1,139.24	Payee address; City; 325 W. 18th St. Houston, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/28 Rpt: 88/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044	
4 Date 10/23/2025	5 Payee name Strong Strategies LLC		
6 Amount (\$) \$530.22	7 Payee address; City; 325 W. 18th St. Houston, TX 77008	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for campaign iphone	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/25/2025	Payee name Strong Strategies LLC		
Amount (\$) \$60.36	Payee address; City; 325 W. 18th St. Houston, TX 77008	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/05/2025	Payee name Switchboard		
Amount (\$) \$66.98	Payee address; City; 1025 Vermont Ave. NW Ste. 1110 Washington, DC 20005	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense texting services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/28 Rpt: 89/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 11/10/2025	5 Payee name USPS	
6 Amount (\$) \$484.00	7 Payee address; City; State; Zip Code 1333 Old Spanish Trail Houston, TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post office box renewal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/07/2025	Payee name USPS	
Amount (\$) \$33.20	Payee address; City; State; Zip Code 1333 Old Spanish Trail Houston, TX 77054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/29/2025	Payee name USPS	
Amount (\$) \$33.20	Payee address; City; State; Zip Code 1333 Old Spanish Trail Houston, TX 77054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/28 Rpt: 90/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044	
4 Date 09/26/2025	5 Payee name Wix		
6 Amount (\$) \$204.00	7 Payee address; City; State; Zip Code 100 Gansevoort St. New York, NY 10014		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense yearly wesbite subscription	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/04/2025	Payee name Wynn, Cicely		
Amount (\$) \$375.00	Payee address; City; State; Zip Code 2030 Nina Lee Ln Houston, TX 77018		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 12/03/2025	Payee name Zoom		
Amount (\$) \$36.53	Payee address; City; State; Zip Code 55 N. Almaden Blvd. San Jose, CA 95113		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/28 Rpt: 91/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 07/03/2025	5 Payee name Zoom	
6 Amount (\$) \$36.53	7 Payee address; City; State; Zip Code 55 N. Almaden Blvd. San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/03/2025	Payee name Zoom	
Amount (\$) \$36.53	Payee address; City; State; Zip Code 55 N. Almaden Blvd. San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/03/2025	Payee name Zoom	
Amount (\$) \$36.53	Payee address; City; State; Zip Code 55 N. Almaden Blvd. San Jose, CA 95113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/28 Rpt: 92/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044
4 Date 10/03/2025	5 Payee name Zoom	
6 Amount (\$) \$36.53	7 Payee address; City; 55 N. Almaden Blvd. San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Zoom	
Amount (\$) \$36.53	Payee address; City; 55 N. Almaden Blvd. San Jose, CA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conference services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 93/93	2 FILER NAME Simmons, Lauren Ashley (The Honorable)	3 Filer ID (Ethics Commission Filers) 00088044	
4 Date 12/18/2025	5 Payee name Harris County Young Democrats		
6 Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 131672 Houston, TX 77219		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/13/2025	Payee name VonLane		
Amount (\$) \$147.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3800 Maple Ave. Ste. 265 Dallas, TX 75219		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense travel to Austin for meetings	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held